# SCDDSN Quality Management PERSONAL OUTCOMES

Historically, measures of quality were often far removed from the actual impact in the lives of the consumers of the services. Agencies would focus on "process measures" rather than "outcome measures", since they were often easier both to measure and to control. If the administrative and programmatic processes, protocol, procedures and paperwork were in place, then the quality of service was assumed.

Over time measures of quality shifted from "processes" to "outcomes," but still the focus was often on what the agency could measure and control best, and this was not the consumer. Under this model, quality was assumed by measures of service objectives written, or units of service delivered.

It has only been recently in the evolution of the nation's long term care system that quality measures have started to become personalized and individualized relative to specific consumers.

DDSN strives to use personal outcome measures to determine how well the service and support providers are helping an individual consumer achieve personal goals. Activity in this area is based on the work of The Council on Quality and Leadership.

Personal outcome measures are often founded on goals that the individual has set for themselves in conjunction with their family and their "circle of support". They are thought about and discussed, hopefully weighed against alternative goals and decided upon. To this degree they are objective and "matters of the head".

On the other hand, measures of consumer <u>satisfaction</u> have a larger affective component; satisfaction is a "matter of the heart". It is very possible for a consumer to have met all of his personal outcome measures, but still feel dissatisfied with his life or the services and supports that he is receiving. Thus, measures of consumer satisfaction must go hand in hand with personal outcome measures in order for an agency to be truly consumer- focused and driven.

Consumer satisfaction surveys are conducted periodically with consumers, families and other stakeholders. DDSN and service providers use this information to improve services and make them more responsive to consumers' needs and wishes.

## Personal Outcome Measures 2005sm

The 21 *Personal Outcome Measures* focus on the outcomes of the person receiving services. By placing the person at the center the definition of quality is **responsiveness to the person** rather than how well the organization performs. The Personal Outcome MeasuresSM are a powerful tool for evaluating quality of life and the degree to which organizations individualize supports to facilitate outcomes.

### **MY SELF**

- People are connected to natural support networks.
- People have intimate relationships.
- People are safe.
- People have the best possible health.
- People exercise rights.
- People are treated fairly.
- People are free from abuse and neglect.
- People experience continuity and security.
- People decide when to share personal information.

### MY WORLD

- People choose where and with whom they live.
- People choose work.
- People use their environments.
- People live in integrated environments.
- People interact with other members of the community.
- People perform different social roles.
- People choose services.

### MY DREAMS

- People choose personal goals.
- People realize goals.
- People participate in the life of the community.
- People have friends.
- People are respected.

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